## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

**Application or Docket Number** 

10/59/873

| 100118   |  |  |   |                                   |                              |              |              |                        |                        |                            |                        |                        |
|--|--|--|---|-----------------------------------|------------------------------|--------------|--------------|------------------------|------------------------|----------------------------|------------------------|------------------------|
| CLAIMS AS FILED - PART I   |  |  |   |                                   |                              |              |              | SMALL ENT              | 1 <b>1</b> Y           | OR                         | OTHER                  |                        |
|  | NATIONAL STAC                                  | E FEEC                                   | (Column 1   | <del>)</del> T                    | (0                           | Column 2)    |              | RATE                   | FEE                    | 7                          | RATE                   | FEE                    |
| U.S. NATIONAL STAGE FEES   |  |  |   |                                   |                              |              |              |                        |                        | -                          |                        |                        |
| BASIC FEE  |  |  | SMALL ENT. = 1  |                                   | E ENT. = \$                  |              | BASIC FEE    | \$150                  | OR                     | BASIC FEE                  | \$300                  |                        |
| EXAMINATION FEE  |  |  | (4) = \$50/\$100  |                                   |                              | er situation |              | EXAM. FEE              |                        |                            | EXAM. FEE              | 200                    |
| SEARCH FEE   |  |  | U.S. is ISA = \$ 50<br>ALL other countr<br>\$ 200 / \$ 40 |                                   | her situatio<br>250 / \$ 500 |              | SEARCH FEE   |                        |                        | SEARCH FEE                 | 400                    |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus   |                                   | / 50 =                       |              | X \$ 125 =   |                        |                        | X \$ 250 =                 |                        |                        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 34 minus 20 = .   |                                   |                              | 14           |              | X \$ 25 =              |                        | OR                         | X \$ 50 =              | 700                    |
| INDEPENDENT CLAIMS   |  |  | minus 3 = .   |                                   |                              |              |              | X \$ 100 =             |                        | OR                         | X \$ 200 =             |                        |
| MUL  | TIPLE DEPENDENT                                | CLAIM PRE                                | SENT  |                                   |                              |              | + \$ 180 =   |                        | OR                     | + \$ 360 =                 | -                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |  |   |                                   |                              |              | TOTAL        |                        | OR                     | TOTAL                      | 1600                   |                        |
| Q. 2 CLAIMS AS AMENDED - PART II  Column 1) (Column 2) (Column 3)  |  |  |   |                                   |                              | nn 3)        | SMALL ENTITY |                        |                        | OTHER THAN<br>SMALL ENTITY |                        |                        |
| AMENDMENT A  |  | CLAIMS<br>EMAINING<br>AFTER<br>MENDMENT! |   | ST<br>ER<br>USLY<br>OR            | ER PRESENT<br>JSLY EXTRA     |              | RATE         | ADDI-<br>TIONAL<br>FEE | -                      | RATE                       | ADDI-<br>TIONAL<br>FEE |                        |
|  | Total *  | 77                                       | Minus *   | - (9)                             | Z./                          | = ·          |              | X \$ 25 =              |                        | OR                         | X \$ 50 =              |                        |
|  | Independent *                                  |  | Minus *   |                                   | 3                            | =            |              | X \$ 100 =             |                        | OR                         | X \$ 200 =             |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |                                   |                              |              |              | + \$ 180 =             |                        | OR                         | + \$ 360 =             |                        |
|  |  |  |   |                                   |                              |              | T            | TOTAL ADDIT.           |                        | OR                         | TOTAL ADDIT.           | 1                      |
| 10 2 Uchrumn 1) (Column 2) (Column 3)  |  |  |   |                                   |                              |              |              |                        |                        |                            |                        |                        |
| 8 2  | R  | CLAIMS<br>EMAINING<br>AFTER<br>MENDMENT  | a   | HIGHE<br>NUMB<br>PREVIO<br>PAID F | BER<br>USLY                  | PRES<br>EXT  |              | RATE                   | ADDI-<br>TIONAI<br>FEE | -                          | RATE                   | ADDI-<br>TIONAL<br>FEE |
| AMENDMEN   | Total *  | 34                                       | Minus .   | 7                                 | 1                            | =            |              | X \$ 25 =              |                        | OR                         | X \$ 50 =              |                        |
| AME  | Independent *                                  |  | Minus *   | ***                               | 5_                           | <b>-</b>     |              | X \$ 100 =             |                        | OR                         | X \$ 200 =             |                        |
|  | FIRST PRESENTA                                 | ATION OF M                               | IULTIPLE DEPEN  | DENT                              | LAIM                         |              | 7            | + \$ 180 =             |                        | OR                         | + \$ 360 =             |                        |
|  |  |  |   |                                   |                              |              |              | TOTAL ADDIT.           |                        | OR                         | TOTAL ADDIT.           |                        |
|  |  |  |   |                                   |                              |              |              |                        |                        |                            |                        |                        |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul> |  |  |   |                                   |                              |              |              |                        |                        |                            |                        |                        |